

Neurotransmitter Assessment Form (NTAF)

Name: _____ Age: _____ Sex: _____ Date: _____

Please circle the appropriate number on all questions below. 0 as the least/never to 3 as the most/always.

SECTION A

- Is your memory noticeably declining? 0 1 2 3
- Are you having a hard time remembering names and phone numbers? 0 1 2 3
- Is your ability to focus noticeably declining? 0 1 2 3
- Has it become harder for you to learn new things? 0 1 2 3
- How often do you have a hard time remembering your appointments? 0 1 2 3
- Is your temperament generally getting worse? 0 1 2 3
- Is your attention span decreasing? 0 1 2 3
- How often do you find yourself down or sad? 0 1 2 3
- How often do you become fatigued when driving compared to in the past? 0 1 2 3
- How often do you become fatigued when reading compared to in the past? 0 1 2 3
- How often do you walk into rooms and forget why? 0 1 2 3
- How often do you pick up your cell phone and forget why? 0 1 2 3

SECTION B

- How high is your stress level? 0 1 2 3
- How often do you feel you have something that must be done? 0 1 2 3
- Do you feel you never have time for yourself? 0 1 2 3
- How often do you feel you are not getting enough sleep or rest? 0 1 2 3
- Do you find it difficult to get regular exercise? 0 1 2 3
- Do you feel uncared for by the people in your life? 0 1 2 3
- Do you feel you are not accomplishing your life's purpose? 0 1 2 3
- Is sharing your problems with someone difficult for you? 0 1 2 3

SECTION C

SECTION C1

- How often do you get irritable, shaky, or have light-headedness between meals? 0 1 2 3
- How often do you feel energized after eating? 0 1 2 3
- How often do you have difficulty eating large meals in the morning? 0 1 2 3
- How often does your energy level drop in the afternoon? 0 1 2 3
- How often do you crave sugar and sweets in the afternoon? 0 1 2 3
- How often do you wake up in the middle of the night? 0 1 2 3
- How often do you have difficulty concentrating before eating? 0 1 2 3
- How often do you depend on coffee to keep yourself going? 0 1 2 3
- How often do you feel agitated, easily upset, and nervous between meals? 0 1 2 3

SECTION C2

- How often do you get fatigued after meals? 0 1 2 3
- How often do you crave sugar and sweets after meals? 0 1 2 3
- How often do you feel you need stimulants, such as coffee, after meals? 0 1 2 3
- How often do you have difficulty losing weight? 0 1 2 3
- How much larger is your waist girth compared to your hip girth? 0 1 2 3
- How often do you urinate? 0 1 2 3
- Have your thirst and appetite increased? 0 1 2 3
- How often do you gain weight when under stress? 0 1 2 3
- How often do you have difficulty falling asleep? 0 1 2 3

SECTION 1

- Are you losing interest in hobbies? 0 1 2 3
- How often do you feel overwhelmed? 0 1 2 3
- How often do you have feelings of inner rage? 0 1 2 3
- How often do you have feelings of paranoia? 0 1 2 3
- How often do you feel sad or down for no reason? 0 1 2 3
- How often do you feel like you are not enjoying life? 0 1 2 3

- How often do you feel you lack artistic appreciation? 0 1 2 3
- How often do you feel depressed in overcast weather? 0 1 2 3
- How much are you losing your enthusiasm for your favorite activities? 0 1 2 3
- How much are you losing your enjoyment for your favorite foods? 0 1 2 3
- How much are you losing your enjoyment of friendships and relationships? 0 1 2 3
- How often do you have difficulty falling into deep, restful sleep? 0 1 2 3
- How often do you have feelings of dependency on others? 0 1 2 3
- How often do you feel more susceptible to pain? 0 1 2 3
- How often do you have feelings of unprovoked anger? 0 1 2 3
- How much are you losing interest in life? 0 1 2 3

SECTION 2

- How often do you have feelings of hopelessness? 0 1 2 3
- How often do you have self-destructive thoughts? 0 1 2 3
- How often do you have an inability to handle stress? 0 1 2 3
- How often do you have anger and aggression while under stress? 0 1 2 3
- How often do you feel you are not rested, even after long hours of sleep? 0 1 2 3
- How often do you prefer to isolate yourself from others? 0 1 2 3
- How often do you have unexplained lack of concern for family and friends? 0 1 2 3
- How easily are you distracted from your tasks? 0 1 2 3
- How often do you have an inability to finish tasks? 0 1 2 3
- How often do you feel the need to consume caffeine to stay alert? 0 1 2 3
- How often do you feel your libido has been decreased? 0 1 2 3
- How often do you lose your temper for minor reasons? 0 1 2 3
- How often do you have feelings of worthlessness? 0 1 2 3

SECTION 3

- How often do you feel anxious or panicked for no reason? 0 1 2 3
- How often do you have feelings of dread or impending doom? 0 1 2 3
- How often do you feel knots in your stomach? 0 1 2 3
- How often do you have feelings of being overwhelmed for no reason? 0 1 2 3
- How often do you have feelings of guilt about everyday decisions? 0 1 2 3
- How often does your mind feel restless? 0 1 2 3
- How difficult is it to turn your mind off when you want to relax? 0 1 2 3
- How often do you have disorganized attention? 0 1 2 3
- How often do you worry about things you were not worried about before? 0 1 2 3
- How often do you have feelings of inner tension and inner excitability? 0 1 2 3

SECTION 4

- Do you feel your visual memory (shapes & images) has decreased? 0 1 2 3
- Do you feel your verbal memory has decreased? 0 1 2 3
- Do you have memory lapses? 0 1 2 3
- Has your creativity decreased? 0 1 2 3
- Has your comprehension diminished? 0 1 2 3
- Do you have difficulty calculating numbers? 0 1 2 3
- Do you have difficulty recognizing objects & faces? 0 1 2 3
- Do you feel like your opinion about yourself has changed? 0 1 2 3
- Are you experiencing excessive urination? 0 1 2 3
- Are you experiencing a slower mental response? 0 1 2 3

Medication History*

Please check any of the following medications you have taken in the past or are currently taking.

Noradrenergic and Specific Serotonergic Antidepressants (NaSSAAs)

- | | |
|-----------------------------------|------------------------------------|
| ☐ Remeron® | ☐ Norset® |
| ☐ Zispin® | ☐ Remergil® |
| ☐ Avanza® | ☐ Axit® |

Tricyclic Antidepressants (TCAs)

- | | |
|--------------------------------------|--------------------------------------|
| ☐ Elavil® | ☐ Prothiaden® |
| ☐ Endep® | ☐ Adapin® |
| ☐ Tryptanol | ☐ Sinequan® |
| ☐ Trepiline® | ☐ Tofranil® |
| ☐ Asendin® | ☐ Janamine® |
| ☐ Asendis® | ☐ Gamanil® |
| ☐ Defanyl® | ☐ Aventyl® |
| ☐ Demolox® | ☐ Pamelor® |
| ☐ Moxadil® | ☐ Opipramol® |
| ☐ Anafranil® | ☐ Vivactil® |
| ☐ Norpramin® | ☐ Rhotrimine® |
| ☐ Pertofranc® | ☐ Surmontil® |

Selective Serotonin Reuptake Inhibitors (SSRIs)

- | | |
|-------------------------------------|-----------------------------------|
| ☐ Paxil® | ☐ Seromex® |
| ☐ Zoloft® | ☐ Seronil® |
| ☐ Prozac® | ☐ Sarafem® |
| ☐ Celexa® | ☐ Fluctin® |
| ☐ Lexapro® | ☐ Faverin® |
| ☐ Luvox® | ☐ Seroxat |
| ☐ Cipramil® | ☐ Aropax® |
| ☐ Emocal® | ☐ Deroxat® |
| ☐ Seropram® | ☐ Rexetin® |
| ☐ Cipralex® | ☐ Paroxat® |
| ☐ Fontex® | ☐ Lustral® |
| ☐ Dapoxetine | ☐ Serlain® |

Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)

- | |
|--------------------------------------|
| ☐ Effexor® |
| ☐ Pristiq® |
| ☐ Meridia® |
| ☐ Serzone® |
| ☐ Dalcipran® |
| ☐ Desipramine |
| ☐ Duloxetine |

Selective Serotonin Reuptake Enhancers (SSREs)

- | |
|-----------------------------------|
| ☐ Stablon® |
| ☐ Coaxil® |
| ☐ Tatinol® |

Monoamine Oxidase Inhibitors (MAOIs)

- | | |
|-------------------------------------|------------------------------------|
| ☐ Marplan® | ☐ Azilect® |
| ☐ Aurorix® | ☐ Marsilid® |
| ☐ Manerix® | ☐ Iprozid® |
| ☐ Moclodura® | ☐ Ipronid® |
| ☐ Nardil® | ☐ Rivivol® |
| ☐ Adelinc® | ☐ Zyvox® |
| ☐ Eldepryl® | ☐ Zyvoxid® |

Dopamine Receptor Agonists

- | |
|-----------------------------------|
| ☐ Mirapex® |
| ☐ Sifrol® |
| ☐ Requip® |

Norepinephrine and Dopamine Reuptake Inhibitors (NDRI)

- | |
|---|
| ☐ Wellbutrin XL® |
|---|

D2 Dopamine Receptor Blockers (antipsychotics)

- | | |
|-------------------------------------|---------------------------------------|
| ☐ Thorazine® | ☐ Acuphase® |
| ☐ Prolixin® | ☐ Haldol® |
| ☐ Trilafon® | ☐ Orap® |
| ☐ Compazine® | ☐ Clozaril® |
| ☐ Mellaril® | ☐ Zyprexa® |
| ☐ Stelazine® | ☐ Zydis® |
| ☐ Vesprin® | ☐ Seroquel XR® |
| ☐ Nozinan® | ☐ Geodon® |
| ☐ Depixol® | ☐ Solian® |
| ☐ Navane® | ☐ Invega® |
| ☐ Fluaxol® | ☐ Abilify® |
| ☐ Clopixol® | |

GABA Antagonist Competitive Binder

- | |
|-------------------------------------|
| ☐ Flumazenil |
|-------------------------------------|

Agonist Modulators of GABA Receptors (benzodiazepines)

- | | |
|-------------------------------------|------------------------------------|
| ☐ Xanax® | ☐ Dalmane® |
| ☐ Lexotanil® | ☐ Ativan® |
| ☐ Lexotan® | ☐ Loramet® |
| ☐ Librium® | ☐ Sedoxil® |
| ☐ Klonopin® | ☐ Dormicum® |
| ☐ Valium® | ☐ Serax® |
| ☐ ProSom® | ☐ Restoril® |
| ☐ Rohypnol® | ☐ Halcion® |

Agonist Modulators of GABA Receptors (nonbenzodiazepines)

- | |
|-------------------------------------|
| ☐ Ambien CR® |
| ☐ Sonata® |
| ☐ Lunesta® |
| ☐ Imovane® |

Acetylcholine Receptor Antagonists Antimuscarinic Agents

- | |
|--------------------------------------|
| ☐ Atropine |
| ☐ Ipratropium |
| ☐ Scopolamine |
| ☐ Tiotropium |

Acetylcholine Receptor Antagonists Ganglionic Blockers

- | |
|--|
| ☐ Mecamylamine |
| ☐ Hexamethonium |
| ☐ Nicotine (high doses) |
| ☐ Trimethaphan |

Acetylcholine Receptor Antagonists Neuromuscular Blockers

- | | |
|--|--|
| ☐ Atracurium | ☐ Rocuronium |
| ☐ Cisatracurium | ☐ Succinylcholine |
| ☐ Doxacurium | ☐ Tubocurarine |
| ☐ Metocurine | ☐ Vecuronium |
| ☐ Mivacurium | ☐ Hemicholinium |
| ☐ Pancuronium | |

Acetylcholinesterase Reactivators

- | |
|--------------------------------------|
| ☐ Pralidoxime |
|--------------------------------------|

Cholinesterase Inhibitors (reversible)

- | | |
|---|---|
| ☐ Donepezil | ☐ Edrophonium |
| ☐ Galantamine | ☐ Neostigmine |
| ☐ Rivastigmine | ☐ Physostigmine |
| ☐ Tacrine | ☐ Pyridostigmine |
| ☐ THC | |
| ☐ Carbamate Insecticides | |

Cholinesterase Inhibitors (irreversible)

- | |
|--|
| ☐ Echothiophate |
| ☐ Isoflurophate |
| ☐ Organophosphate Insecticides |
| ☐ Organophosphate-containing nerve agents |

*Please refer to prescribing physician for nutritional interactions with any medications you are taking.